

no mucoid discharge in either eye as previously and the KCS was assessed as medically improved.

After similar treatment for another two months, the Schirmer tear test values were 11 mm/minute in the right eye and 17 mm/minute in the left eye. The dog's eyes had minimal corneal vascularization and minimal scarring.

In this case, although the dog was treated initially with pilocarpine, pilocarpine alone is not known to cause such a drastic improvement in tear production. After treatment with cyclosporine, the dog improved from no tear flow in either eye to normal tear production in both eyes. The dog improved from blinding corneal inflammation to very mild corneal pigmentation in both eyes. Treatment with cyclosporine markedly increased tear production and allowed the dog to return to normal vision.

I claim:

1. A method for enhancing or restoring lacrimal gland tearing comprising topically administering cyclosporin to the eye in a pharmaceutically acceptable vehicle.

2. The method of claim 1 for increasing tear production in a tear-deficient eye comprising topically administering a therapeutically effective amount of a cyclosporin to said eye.

3. The method of claim 2 wherein said cyclosporin is administered as a solution, suspension or ointment comprising 0.01 to 50 weight percent of cyclosporin in a pharmaceutically acceptable excipient.

4. The method of claim 3 wherein said cyclosporin is administered in an amount of 0.1 to 20 weight percent.

5. The method of claim 3 wherein the pharmaceutically acceptable excipient is olive oil, arachis oil, castor oil, polyoxyethylated castor oil, mineral oil, petroleum jelly, dimethyl sulphoxide, an alcohol, liposome, silicone fluid or a mixture thereof.

6. The method of claim 2, wherein said cyclosporin is Cyclosporin A.

7. The method of claim 2 for increasing tear production in an eye of a patient suffering from an autoimmune dysfunction of the lacrimal glands comprising adminis-

tering a therapeutically effective amount of a cyclosporin topically to the patient's eye.

8. The method of claim 2 for treating keratoconjunctivitis sicca in a patient comprising the step of administering a therapeutically effective amount of a cyclosporin topically to the patient's eye.

9. The method of claim 1 for treating a disorder caused by immune activity in a lacrimal gland of a patient comprising the step of topically administering to the patient's eye a therapeutically effective amount of a cyclosporin to enhance or restore tearing.

10. The method of claim 9 wherein said cyclosporin is administered as a solution, suspension or ointment comprising 0.01 to 50 weight percent of cyclosporin in a pharmaceutically acceptable excipient.

11. The method of claim 10 wherein said cyclosporin is administered in an amount of 0.1 to 20 weight percent.

12. The method of claim 10 wherein the pharmaceutically acceptable excipient is olive oil, arachis oil, castor oil, polyoxyethylated castor oil, mineral oil, petroleum jelly, dimethyl sulphoxide, an alcohol, liposome, silicone fluid or a mixture thereof.

13. The method of claim 9, wherein said cyclosporin is Cyclosporin A.

14. The method of claim 1 for treating a disorder exacerbated by deficient tear production in a patient comprising topically administering a therapeutically effective amount of a cyclosporin to the patient's eye to enhance or restore tearing.

15. The method of claim 14 wherein said cyclosporin is administered as a solution, suspension or ointment comprising 0.01 to 50 weight percent of cyclosporin in a pharmaceutically acceptable excipient.

16. The method of claim 15 wherein said cyclosporin is administered in an amount of 0.1 to 20 weight percent.

17. The method of claim 15 wherein the pharmaceutically acceptable excipient is olive oil, arachis oil, castor oil, polyoxyethylated castor oil, mineral oil, petroleum jelly, dimethyl sulphoxide, an alcohol, liposome, silicone fluid or a mixture thereof.

18. The method of claim 14, wherein said cyclosporin is Cyclosporin A.

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